							Application or Docket Number				
	PATENT A	APPLICATIO Effe	ON FEE D	RD	9	06	Q34	25			
			S FILED -	SMA TYF	LL ENTITY	OR	OTHER SMALL				
FOR		NUMB	BER FILED NUMBER EXT		EXTRA	RATE	FEE		RATE	FEE	
BASI	C FEE					en embrio	395.00	OR		790.00	
TOTA	L CLAIMS	5	$\frac{23}{2}$ minus 20 = $\frac{2}{3}$			x\$11	=	OR	x\$22=	66	
INDE	PENDENT CLA	MS	minus 3 = *			x41=	=	OR	x82=	328	
MULTIPLE DEPENDENT CLAIM PRESENT							=	OR	+270=	<u> </u>	
* If th	e difference in co	olumn 1 is less than	zero, enter "O" i	TOTA	iL	OR	TOTAL	1184			
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						SMA	ALL ENTITY	OR		R THAN ENTITY	
7		(Column 1) CLAIMS		HIGHEST			1	7		<u> </u>	
•		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- E TIONAL FEE	,	RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	. 18	Minus	" 23	= <b>b</b>	x\$11	=	OR	x\$22=		
ME	Independent	* 1	Minus	*** 7	= 🛇	x41=	=	OR	x82=		
A	FIRST PRES	SENTATION OF	MULTIPLE	DEPENDENT CL	AIM	+135	=	OR	+270=		
							TAL EE	OR	TOTAL ADDIT. FEE	·	
6		(Column 1) CLAIMS	Fig. 1	(Column 2) HIGHEST	(Column 3)	l <b>r</b>		_			
<b>₽</b>		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATI	ADDI- TIONAI FEE	-	RATE	ADDI- TIONAL FEE	
AMENDMEN	Total	*	Minus	* 23	=	x\$11	=	OR	x\$22=		
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Ā	FIRST PRE	SENTATION OF	MULTIPLE	DEPENDENT CL	AIM	+135	5=	OR	+270=		
		(Column 1)		TO ADDIT. F		OR	TOTAL ADDIT. FEE				
34		CLAIMS		(Column 2) HIGHEST	(Column 3)		1,55	7		T	
5		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY	PRESENT EXTRA	RAT	E TIONA FEE	-	RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus	PAID FOR	=	x\$11		OR	x\$22=		
JEN I	Independent	*	Minus	***	=	x41	=	OR	x82=		
<b>[</b>	FIRST PRE	SENTATION OF	MULTIPLE	DEPENDENT CL	_AIM	+135	5=	OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										<u> </u>	
EORM PTO-875 (Rev 8/97)  Belond and Tradomark Office 11.5 DEDADTMENT OF COMMED											



## UNITED STATES DEPARTMENT OF COMMERCE Patent and Trademark Office ASSISTANT SECRETARY OF COMMERCE AND COMMISSIONER OF PATENTS AND TRADEMARKS Washington, D.C. 20231

## NOTICE OF FILING/CLAIM FEE(S) DUE TO ENSURE PROPER CREDIT OF FEES PLEASE DETURNAL CONTROL

TO ENSURE PROPER CREDIT OF FEES, PLEASE RETURN A COPY OF THIS FEE CALCULATION SHEET WITH YOUR RESPONSE.

APPLICATION	NUMBER:	08	190636	5								
Total Fee Calculation												
	Fee Code	Total # Claims	Number Extra	X	Fee	Fee =	Total					
i	Sm./Lg.	•			Sm. Entity	Lg. Entity	10001					
Basic Filing Fee	201/101	·				476	49ih					
Total Claims >20	203/103	23 -2	0= <u> </u>	x		25	4					
Independent Claims >3	202/102	<u> 7</u> -3	= 4	x		80	<u> </u>					
Mult. Dep Claim Present	204/104					<del>-7</del> _						
Surcharge	205/105					1398	1926					
English Translation	_139					<u> </u>	<u> 134</u>					
TOTAL FEE GAY GY	· .				•		•					
TOTAL FEE CALCUL	ATION					,	1286					
Fees due upon filing t	he application:											
Total Filing Fees Due	=\$	1286										
Less Filing Fees Subm	itted - \$			_								
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FORM OIPE-RAM-01 (Rev. 5/97)

Office of Initial Patent Examination